

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF TENNESSEE

DIVISION

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JAN 25 2016

U.S. DISTRICT COURT
MID. DIST. TENN.

ANANT KUMAR TRIPATI

(Name)

* 102081

(Prison Id. No.)

(Name)

(Prison Id. No.)

Plaintiff(s)

v.

CORIZO INC.

(Name)

SEE ATTACHED 2 AND 2A

(Name)

Defendant(s)

(List the names of all the plaintiffs filing
this lawsuit. Do not use "et al." Attach
additional sheets if necessary.)

Civil Action No. _____
(To be assigned by the Clerk's Office.
Do not write in this space.)

JURY TRIAL REQUESTED ☒ YES ☐ NO

(List the names of all defendants
against whom you are filing this
lawsuit. Do you use "et al." Attach
additional sheets if necessary.)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS FILED
PURSUANT TO 42 U.S.C. § 1983

I. PARTIES TO THIS LAWSUIT

A. Plaintiff(s) bringing this lawsuit:

- Name of the first plaintiff: ANANT KUMAR TRIPATI
Prison I.D. No. of the first plaintiff: *102081
Address of the first plaintiff: ASPC TUCSON, MANZANITA UNIT C-14,
P.O. BOX 24401, TUCSON ARIZONA, 85734-4401

Status of Plaintiff: CONVICTED (☒) PRETRIAL DETAINEE (☐)

- Name of the second plaintiff: _____
Prison I.D. No. of the second plaintiff: _____
Address of the second plaintiff: _____

Status of Plaintiff: CONVICTED (☐) PRETRIAL DETAINEE (☐)

Deliberate Indifference to Serious Medical Needs By
Policy makers in Brentwood who give directives
and who implement directives

- 1) Dr. Lucy Burciaga Corizon Inc. 103 W. Park Dr. #200 Brentwood, Tn 37027
- 2) B. Anderson Flatt C/O General Counsel ^{Corizon Inc.} 103 W. Park Dr. #200 Brentwood, Tn 37027
- 3) Tracy Nolan (C/O General Counsel) Corizon Inc. 103 W. Park Dr. #200 Brentwood Tn 37027
- 4) Jonathan Walker (C/O General Counsel) ^{Corizon} Inc. 103 W. Park Dr. #200 Brentwood Tn 37027
- 5) Dr. Woodrow Myers (C/O General Counsel) ^{Corizon} Inc. 103 W. Park Dr. #200 Brentwood Tn 37027
- 6) Karey Witty (C/O General Counsel) ^{Corizon} Inc. 103 W. Park Dr. #200 Brentwood Tn 37027
- 7) Dr. Harold Orr (C/O General Counsel) ^{Corizon} Inc. 103 W. Park Dr. #200 Brentwood, Tn 37027
- 8) Scott Bowers (C/O General Counsel) ^{Corizon} Inc. 103 W. Park Dr. #200 Brentwood Tn 37027
- 9) Angela Martinez R.N. ^{Corizon Nursing} Supervisor (C/O General Counsel) ^{Corizon} Inc. 103 W. Park Dr. #200 Brentwood Tn 37027
- 10) Tammy Porter (R.N. Corizon Facility Administrator) ^{Corizon Inc.} 103 W. Park Dr. #200 Brentwood, Tn 37027
- 11) Lisa Lyon (R.N. Corizon Asst. Administrator) ^{Corizon Inc.} 103 W. Park Dr. #200 Brentwood, Tn 37027

Persons Who Enforce directives in Arizona

- 12) Glen Pacheco Policy Maker ^{P.O. Box 24400} Tucson, Az 85734
- 13) Martene Bedoya Policy Maker ^{P.O. Box 24400} Tucson, Az 85734
- 14) Michelle Frame ^{P.O. Box 24400} Tucson, Az 85734
- 15) Pan'ean Days Policy Maker ^{P.O. Box 24400} Tucson Az 85734
- 16) Anna Jacobs ^{P.O. Box 24400} Tucson, Az, 85734
- 17) Ori David Robertson 1601 W. Jefferson Phoenix, Az ~~85706~~ ⁸⁵⁰⁰⁷
- 18) Charles L Ryan 1601 W. Jefferson Phoenix Az ~~85706~~ ⁸⁵⁰⁰⁷
- 19) Julia Erwin 1601 W. Jefferson Phoenix Az ~~85706~~ ⁸⁵⁰⁰⁷
- 20) Juliette Resplido - Montalvy 1601 W. Jefferson Phoenix Az ~~85706~~ ⁸⁵⁰⁰⁷
- 21) Cheryl Dossett 1601 W. Jefferson Phoenix Az ~~85706~~ ⁸⁵⁰⁰⁷
- 22) Does 1-100, employees and agents unknown

(Include the name of the institution and mailing address with zip code for each plaintiff. If any plaintiff changes his or her address, he or she must notify the Court immediately. If there are more than two plaintiffs, list their names, prison identification numbers, and addresses on a separate sheet of paper.)

B. Defendant(s) against whom this lawsuit is being brought:

1. Name of the first defendant: CORIZON INCORPORATED
 Place of employment of the first defendant: ADOC 1601 WEST
JEFFERSON, PHOENIX ARIZONA 85007
 First defendant's address: CORIZON INC, CORP. OFFICE, 103 W.
PARK DRIVE #200, BRENTWOOD TN. 37027

Named in official capacity? ☒ Yes ☐ No
 Named in individual capacity? ☒ Yes ☐ No

2. Name of the second defendant: Dr Calvin Johnson
 Place of employment of the second defendant: Corizon Inc
103 W. Parc Drive #200 Brentwood, TN 37027
 Second defendant's address: Corizon Inc 103 W. Parc Drive #200
Brentwood - TN, 37027

Named in official capacity? ☒ Yes ☐ No
 Named in individual capacity? ☒ Yes ☐ No

(If there are more than two defendants against whom you are bringing this lawsuit, you must list on a separate sheet of paper the name of each additional defendant, his or her place of employment, address, and the capacity in which you are suing that defendant. If you do not provide the names of such additional defendants, they will not be included in your lawsuit. If you do not provide each defendant's proper name, place of employment, and address, the Clerk will be unable to serve that defendant should process issue.)

II. JURISDICTION

- A. Jurisdiction is asserted pursuant to 42 U.S.C. § 1983 (applies to state prisoners).
 Jurisdiction is also invoked pursuant to 28 U.S.C. § 1343(a)(3). 28 USC 1651
Rule 65

If you wish to assert jurisdiction under different or additional statutes, you may list them below: DIVERSITY OF CITIZENSHIP, I AM A BRITISH
CITIZEN, THE DEFENDANTS FROM ARIZONA AND
TENNESSEE. 28 U.S.C. 1332. THE AMOUNT IN
CONTROVERSY LESS PENALTY AND INTEREST EXCEEDS \$250,000.

III. PREVIOUS LAWSUITS (The following information must be provided by each plaintiff.)

A. Have you or any of the other plaintiffs in this lawsuit filed any other lawsuit(s) in the United States District Court for the Middle District of Tennessee, or in any other federal or state court? Yes ~~No~~

B. If you checked the box marked "Yes" above, provide the following information:

1. Parties to the previous lawsuit:

Plaintiffs ANANT KUMAR TRIPATHI

Defendants CORIZON INCORPORATED

2. In what court did you file the previous lawsuit? UNITED STATES DISTRICT COURT

(If you filed the lawsuit in federal court, provide the name of the District. If you filed the lawsuit in state court, provide the name of the state and the county.)

3. What was the case number of the previous lawsuit? CIV 13-0615

4. What was the Judge's name to whom the case was assigned? JUDGE DAVID BURY

5. What type of case was it (for example, habeas corpus or civil rights action)? CIVIL RIGHTS

6. When did you file the previous lawsuit? (Provide the year, if you do not know the exact date.) 2013

7. What was the result of the previous lawsuit? For example, was the case dismissed or appealed, or is it still pending? STILL PENDING FOR APPEAL

8. When was the previous lawsuit decided by the court? (Provide the year, if you do not know the exact date.) _____

9. Did the circumstances of the prior lawsuit involve the same facts or circumstances that you are alleging in this lawsuit? Yes ~~No~~

(If you have filed more than one prior lawsuit, list the additional lawsuit(s) on a separate sheet of paper, and provide the same information for the additional lawsuit(s).) I HAVE FILED MORE THAN THREE CASES, MY RECORDS HAVE BEEN LOST BY ARIZONA DEPT. OF CORRECTION.

IV. EXHAUSTION

A. Are the facts of your lawsuit related to your present confinement?

☒ Yes ☐ No

B. If you checked the box marked "No" in question III.B above, provide the name and address of the prison or jail to which the facts of this lawsuit pertain. _____

C. Do the facts of your lawsuit relate to your confinement in a Tennessee state prison?

☐ Yes ☒ No

(If you checked the box marked "No," proceed to question IV.G. If you checked the box marked "Yes," proceed to question IV.D.)

D. Have you presented these facts to the prison authorities through the state grievance procedure? ☒ Yes ☐ No

E. If you checked the box marked "Yes" in question III.D above:

1. What steps did you take? APPEALED TO DIRECTOR ADOL

2. What was the response of prison authorities? RELIEF DENIED

F. If you checked the box marked "No" in question IV.D above, explain why not. _____

G. Do the facts of your lawsuit pertain to your confinement in a detention facility operated by city or county law enforcement agencies (for example, city or county jail, workhouse, etc.)? ☐ Yes ☒ No

H. If "Yes" to the question above, have you presented these facts to the authorities who operate the detention facility? ☐ Yes ☐ No

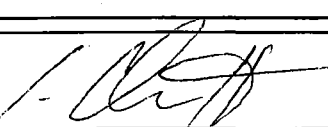
I. If you checked the box marked "Yes" in question III.H above:

1. What steps did you take? _____

ARIZONA DEPARTMENT OF CORRECTIONS

For distribution: Copy of corresponding
Inmate Letter must be attached to this
response.

Inmate Letter Response

Inmate Name (Last, First M.I.) Tripathi, Anant		ADC Number 102081
Institution/Unit ASPC/Tucson/Manzanita		
From COIV J. Mattos	Location Programs Grievance Coordinator	
<p>This is in response to your inmate letter concerning issues with Medical and responses received. I have reviewed all your grievances filed for the last 18 months and you have grieved issues on pain medication, change of medication, medical appointments, medical tests and medical diet. These issues have been sent through our grievance process and you no longer need to grieve these issues since they have been grieved previously.</p>		
Staff Signature 		Date 2-23-15

Distribution: Original - Master Record File
Copy - Inmate

916-2
5/14/12

2. What was the response of the authorities who run the detention facility? _____

J. If you checked the box marked "No" in question IV.H above, explain why not. _____

V. CAUSE OF ACTION

Briefly explain which of your constitutional rights were violated:

1st, 4th, 8th, 14th AMENDMENTS Among others

VI. STATEMENT OF FACTS

State the relevant facts of your case as briefly as possible. Include the dates when the incidents or events occurred, where they occurred, and how each defendant was involved. Be sure to include the names of other persons involved and the dates and places of their involvement.

If you set forth more than one claim, number each claim separately and set forth each claim in a separate paragraph. Attach additional sheets, if necessary. Use 8 ½ inch x 11 inch paper. Write on one side only, and leave a 1-inch margin on all 4 sides.

A) Corizon, Burciaga, Platt, Nolan, Walker, Myers, Witty, Orr, Bowers, Does, Martinez, Porter, Lyon, violated my 1st, 8th and 14th Amend. Rights. Committed negligence by their conduct in this complaint delaying ~~my~~ denying / deferring treatment for serious medical needs.

B) Pacheco, Bedoya, Frame, Days, Jacobs, Robertson, Ryan, Erwin, Respicio, Moriarity, Does violated my First, Fourteenth and Eighth Amendment Rights by their Conduct in the Complaint DELAYING / DENYING / DEFERRING TREATMENT FOR my SERIOUS MEDICAL NEEDS

VII. **RELIEF REQUESTED:** State exactly what you want the Court to order each defendant to do for you.

Corizon return all monies received from any source to provide
Plaintiff demands a trial by jury, damages of 500,000 per defendant, order that
defendants provide Tripodi the treatment and such other relief as this court may
find fit and proper, Corizon returns all monies received from any source to
provide inmates healthcare, defendants return all thier earnings

I request a jury trial. ☒ Yes ☐ No

VIII. **CERTIFICATION**

I (we) certify under the penalty of perjury that the foregoing complaint is true to the best of my (our) information, knowledge and belief.

Signature: [Signature]

Date: 1/23/16

Prison Id. No. 102081

Address (Include the city, state and zip code.): Box 14607 Phoenix

Signature: _____

Date: _____

Prison Id. No. _____

Address (Include the city, state and zip code.): _____

ALL PLAINTIFFS MUST SIGN AND DATE THE COMPLAINT, and provide the information requested above. If there are more than two plaintiffs, attach a separate sheet of paper with their signatures, dates, prison identification numbers, and addresses.

ALL PLAINTIFFS MUST COMPLETE, SIGN, AND DATE SEPARATE APPLICATIONS TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS, if not paying the civil filing fee.

SUBMIT THE COMPLAINT AND (1) THE REQUIRED FILING FEE OR (2) COMPLETED APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES AND COSTS TOGETHER.

Complaints received without the required filing fee or application to proceed without prepayment of fees will be returned. Filing fees and applications to proceed without prepayment of fees submitted without a complaint will be returned.

①

Policy of deliberate indifference
to serious medical needs
from Brentwood Tennessee

- 1) Beginning July 23rd, 2013 and continuing to date defendants engaged in the conduct in this complaint
- 2) Flatt, Nolan, Walker, Myers, Witty, ORR, Bowersides as "Policy Makers of Corizon" in Tennessee designed, established, formed, promulgated and ratified policies of Corizon. Charles Ryan has promulgated and ratified Policies of AZDOC.
- 3) These policies ratified have been communicated to Corizon Nation wide e-mail and mail from Brentwood Tennessee.
- 4) The Policies as implemented provide for, acting with deliberate indifference to prisoners serious medical needs, denial of medical care, delay in medical treatment, denying effective medication, changing providers order for non-medical reasons.
- 5) Washington County Jail in Oregon cancelled the healthcare contract with Corizon due to the policies.
- 6) Heap V Wortham, CIV 14-00105 U.S. D-Ct. Oregon was settled by Corizon in February 2015 to prevent disclosure of Corizon's policies.
- 7) Corizon paid 602,000 to William A. Bown in Bown V Reinke USDC Idaho as Bown had a heart attack due to these policies.
- 8) New York City cancelled a 400 million contract with Corizon due to these policies.
- 9) Maine, Maryland, Minnesota, Pennsylvania cancelled more than 2 billion in contracts due to these policies.

②

- 10) As of August 31, 2015 Allegheny County Jail Cancelled a 32 million Corizon contract due to these policies.
- 11) Corizon and ADOC shop for providers and change them at critical times to disrupt continuing^{ing} of care and issue orders that are adverse to inmates, but save money for Corizon. Instructions from Brentwood; Brentwood by E-Mail and phone calls. I have been told, advised Corizon staff to follow the policy of "Deliberate Indifference to service medical needs in paragraphs 2 through 4.

Corizon staff in Arizona

- 12) Martinez, Burciaga, Porter, Lyon and "Does" aware of their obligations not to delay, deny, defer medical care for serious medical needs, have done so upon directives of those in paragraph 2

First Action: How am I affected

- 13) Beginning July 23rd, 2013 And continuing to date I have been denied treatment for my serious medical needs. I have had High Blood Pressure with a consistency. My Blood Pressure is VERY High at night. It is erratic, near death levels.
- 14) After eating food I have allergies to, I have been in hospital 5 times nearly Dead after eating food that I have allergies to and 40 times in the prison infirmary unconscious.
- 15 A) Defendants have diagnosed me as being allergic to soy, wheat, dairy, beans, nuts, gluten.
- 15 B) Defendants have also diagnosed me as hypoglycemic and having High Blood Pressure.
- 16) As a Hindu I do not eat meat as it is against my religion.
- 17) The treatment for High Blood Pressure is NO SALT.
- 18) Because of the policies of Corizon and ADOC and upon the directives of those in paragraph 2 Martinez Burciaga,

③

Porter, Lyon, Bedoya, Pacheco, Days, Robertson, Ryan, Respicio - Moriarity, Dosset and Does have refused to order a diet that comports to my medical and religious needs.

- 19) Defendants have the duty to order me a diet that comports to my medical needs and religious tenets - A vegetarian diet comports up to my medical needs.
- 20) Acting pursuant to ADOC Policy and that of Corizon, to be deliberate indifference to inmates serious medical needs. Defendant refuse to provide me the proper treatment as discussed in paragraph 1 to 19.
- 21A) Erwin has refused to let me make copies of legal documents about the matter, and Dossett and Ryan have upheld this.
- 21B) Frame and Jacobs have refused to allow me to receive medical texts so that I can find out other causes of treatment.
- 21C) Martinez forged a document denying me medical care bearing my signature, and those in 17 covered this up.
- 21D) They refuse to allow me to receive medical text for the texts show they are giving me ineffective treatment for my serious medical needs.

Injunction Request

I ask that an order issue that I receive a vegetarian diet required by my Hindu Religious Tenets that comports to my medical needs, and ordered on
09-05-2014

See Attached



JANICE K. BREWER
GOVERNOR

Arizona Department of Corrections

1601 WEST JEFFERSON
PHOENIX, ARIZONA 85007
(602) 542-5497
www.azcorrections.gov



CHARLES L. RYAN
DIRECTOR

MEDICAL GRIEVANCE APPEAL: TO THE DIRECTOR

Inmate Name: TRIPATI, ANANT

ADC No.: 102081

Case Nos.: C14-119-014

Institution: ASPC-TUCSON/MANZANITA

Date Received: November 5, 2014

I have reviewed your Grievance Appeal in which you state that "ADOC has refused to give me my diet" that was ordered by the Chief Medical Officer of Corizon.

Your grievance appeal has been investigated including a review of your medical records. Based on our findings, your appeal is denied. The reasons for this decision are:

1. Our review shows that on 8/28/14, you met with Corizon's Medical Director (Dr. S. McQueen) concerning your diet issues. You were subsequently issued a No Gluten Diet/Allergy Diet. We have confirmed that this diet order has been implemented. As to your request for a Hindu Diet/Vegan Diet, this is a religious diet and is under the purview of the Chaplain; therefore, it will not be addressed within this response. You are advised to discuss your request for a religious diet with the Chaplain assigned at your facility.
2. Please submit a Health Needs Request (HNR) if you have additional issues or concerns which you wish to discuss with a medical provider.

This response concludes the medical grievance process per Department Order 802.11 Medical Grievance.


Charles L. Ryan, Director

1/27/15
Date

cc: Facility Health Administrator, ASPC-Tucson
C.O. Inmate File

ARIZONA DEPARTMENT OF CORRECTIONS
INMATE GRIEVANCE APPEAL RESPONSE

ARIZONA DEPARTMENT



OF CORRECTIONS

<u>Log #</u>	<u>Inmate Name</u>	<u>ADC#</u>	<u>Case #</u>	<u>Complex</u>	<u>Unit</u>
458	Tripati	102081	15C14028	Tucson	Manzanita

In your grievance filed at Manzanita Unit, you are requesting a policy change that allows you to receive a medical and religious diet at mealtimes.


Your grievance appeal has been reviewed at Central Office and the Warden's response is affirmed. You are currently on a medically ordered diet for food allergies. The medical diet cannot coexist with a vegan diet, as the vegan diet contains items to which you claim to be allergic. Therefore, as long as you remain on the medical diet, you cannot receive a vegan diet.

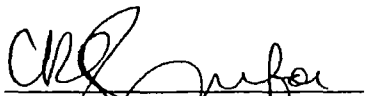
Your request for a policy change is denied.

No further action is warranted in this matter.


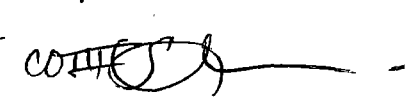
CC: Warden, Tucson Complex

H.R.


Appeals Officer


Charles L. Ryan, Director

8/18/15
Date

received 8/20/15 
delivered 8/20/15 
2

ARIZONA DEPARTMENT OF CORRECTIONS

Restricted Diet Order

☐ New ☐ Change ☒ Reissue

Health Care Providers and Senior Chaplains ordering restricted diets will complete, sign and date the Restricted Diet Order Form. The HAP or Senior Chaplain will retain their portion of the form and ensure the form is placed in the inmate's records with the remaining portion of the order form forwarded to the

Inmate Name (Last, First M.I.) Trapala, Arnold L.		ADC Number 152081	
Institution/Facility/Unit CISPT/MC-2	Housing Assignment 3B15L	Start Date 7/12/14	Expiration Date None

MEDICAL DIETS

<input type="checkbox"/> Dental/Mechanical Soft Diet (Easy to chew/swallow)	<input type="checkbox"/> Controlled Protein Diet	<input type="checkbox"/> Pregnancy
<input type="checkbox"/> Clear Liquid Diet	<input type="checkbox"/> Long-term Full Liquid Diet (Automatically expires in 8 weeks - supplement required)	<input type="checkbox"/> Renal/Dialysis Diet
<input type="checkbox"/> Full Liquid Diet (Automatically expires in 5 days)	<input type="checkbox"/> Wasting Syndrome	<input checked="" type="checkbox"/> Allergy Diet
<input type="checkbox"/> Liquid Supplements	<input type="checkbox"/> Chemotherapy Diet	
<input checked="" type="checkbox"/> No Gluten Diet		
<input type="checkbox"/> Prescribed snack consisting of: 6 saltine crackers or 3 graham crackers		
<input checked="" type="checkbox"/> am snack	<input checked="" type="checkbox"/> mid-day snack	<input checked="" type="checkbox"/> pm snack
<input checked="" type="checkbox"/> Other: Food prescribed per physician orders for his allergy		
<input type="checkbox"/> (Restricted medical diets not defined in the ADC Diet Reference Manual may be ordered only with the approval of the Medical Director of Health Services or designee with the following approving authority Signature)		
Approving Authority Signature: [Signature]		

RELIGIOUS DIETS

<input type="checkbox"/> Lacto Vegetarian Diet (Allows milk and milk products)	<input type="checkbox"/> Kosher Diet Plan	None
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NOTICE TO INMATE: Medical Diets take precedence over Religious Diets. If a medical condition exists that is contraindicated by the Religious Diet, the Medical Diet will supersede it. Inmate will be removed from the diet roster for non-compliance when five (5) meals are missed in seven (7) calendar days or when the inmate requests removal in writing. Inmates are to receive only the prescribed religious/medical diet and each inmate is responsible for his/her restricted diet and compliance to their diet.

MEDICAL: I understand the terms and conditions of this diet.

Inmate's Signature: [Signature]	Date: 7/12/14	Comments
Approved by: [Signature]	Date: 7/12/14	

RELIGIOUS: I understand that if I miss 5 meals in 7 days I may be removed from this diet for 6 months. Second violation will result in a 12 month suspension.

Inmate's Signature: [Signature]	Date: [Blank]	Comments
Approved by: [Signature]	Date: [Blank]	

DIET IS BEING DISCONTINUED DUE TO:

Date

DISTRIBUTION: Initial: Originator - Top portion of form only - Food Service Liaison - Remaining form - Diet Card Only

ARIZONA DEPARTMENT OF CORRECTIONS Restricted Diet Card

Inmate Name Trapala, Arnold L.	ADC Number 152081	Expire Date None
<input checked="" type="checkbox"/> Dental/Mechanical Soft (Easy to chew/swallow)	<input type="checkbox"/> Controlled Protein	<input checked="" type="checkbox"/> Gluten Free
<input type="checkbox"/> Clear Liquid	<input type="checkbox"/> Long-term Full Liquid	<input type="checkbox"/> Pregnancy
<input type="checkbox"/> Full Liquid	<input type="checkbox"/> Wasting Syndrome	<input type="checkbox"/> Renal/Dialysis
<input type="checkbox"/> Liquid Supplements	<input type="checkbox"/> Chemotherapy	<input type="checkbox"/> Allergy Diet
<input checked="" type="checkbox"/> am snack	<input checked="" type="checkbox"/> mid-day snack	<input checked="" type="checkbox"/> pm snack
<input type="checkbox"/> Prescribed snack consisting of: 6 saltine crackers or 3 graham crackers		
<input checked="" type="checkbox"/> Other: [Signature]		

☒ Lacto Vegetarian Diet (Allows milk and milk products)

☐ Kosher Diet Plan

Food Service Verification

Physician or Chaplain's Signature

Date

ARIZONA DEPARTMENT OF CORRECTIONS

Restricted Diet Order

☐ New ☐ Change ☐ Reissue

Health Care Providers and Senior Chaplains ordering restricted diets will complete, sign and date the Restricted Diet Order Form. The HAP or Senior Chaplain will retain their portion of the form and ensure the form is placed in the inmate's records with the remaining portion of the order form forwarded to the

Inmate Name (Last, First M.I.) TRIPATI ANANT		ADC Number 102081	
Institution/Facility/Unit MAN	Housing Assignment 5B 15L	Start Date 9-2-14	Expiration Date NONE

MEDICAL DIETS

<input type="checkbox"/> Dental/Mechanical Soft Diet (Easy to chew/swallow)	<input type="checkbox"/> Controlled Protein Diet	<input type="checkbox"/> Pregnancy
<input type="checkbox"/> Clear Liquid Diet	<input type="checkbox"/> Long-term Full Liquid Diet (Automatically expires in 8 weeks - supplement required)	<input type="checkbox"/> Renal/Dialysis Diet
<input type="checkbox"/> Full Liquid Diet (Automatically expires in 5 days)	<input type="checkbox"/> Wasting Syndrome	<input checked="" type="checkbox"/> Allergy Diet
<input type="checkbox"/> Liquid Supplements	<input type="checkbox"/> Chemotherapy Diet	
	<input checked="" type="checkbox"/> NO Gluten Diet	

☐ Prescribed snack consisting of: 6 saltine crackers or 3 graham crackers

☐ am snack ☐ mid-day snack ☐ am snack

☐ Other: **PATIENT DOES NOT REQUIRE RAST TESTING I have documentation from prev testing**

☐ (Restricted medical diets not defined in the ADC Diet Reference Manual may be ordered only with the approval of the Medical Director of Health Services or designee with the following approving authority Signature.

Approving Authority Signature: _____

RELIGIOUS DIETS

HINDU ☐ Lacto Vegetarian Diet (Allows milk and milk products) ☐ Kosher Diet Plan **VEGAN Diet only**

NOTICE TO INMATE - Medical Diets take precedence over Religious Diets. If a medical condition exists that is contraindicated by the Religious Diet, the Medical Diet will supersede it. Inmate will be removed from the diet roster for non-compliance when five (5) meals are missed in seven (7) calendar days, or when the inmate requests removal in writing. Inmates are to receive only the prescribed religious/medical diet and each inmate is responsible for his/her restricted diet and compliance to their diet.

MEDICAL - I understand the terms and conditions of this diet.

Inmate's Signature <i>[Signature]</i>	Date 9/1/14	Comments CHAS CLINICAL OFFICE OF CORRECTIONS REVIEWED AND INTERVIEWED PATIENT DIRECTLY
Approved by: <i>[Signature]</i> Sylvia McQueen MD	Date 8-28-14	

RELIGIOUS - I understand that if I miss 5 meals in 7 days I may be removed from this diet for 6 months. Second violation will result in a 12 month suspension.

Inmate's Signature	Date	Comments
Approved by:	Date	

DIET IS BEING DISCONTINUED DUE TO:	Date
---	------

DISTRIBUTION Initial - Originator - Top portion of form only, Food Service Liaison - Remaining form - Diet Card Only

ARIZONA DEPARTMENT OF CORRECTIONS Restricted Diet Card		
Inmate Name	ADC Number	Expire Date
<input type="checkbox"/> Dental/Mechanical Soft (Easy to chew/swallow) <input type="checkbox"/> Controlled Protein <input type="checkbox"/> Gluten Free <input type="checkbox"/> Clear Liquid <input type="checkbox"/> Long Term Full Liquid <input type="checkbox"/> Pregnancy <input type="checkbox"/> Full Liquid <input type="checkbox"/> Wasting Syndrome <input type="checkbox"/> Renal Dialysis <input type="checkbox"/> Liquid Supplements <input type="checkbox"/> Chemotherapy <input type="checkbox"/> Allergy Diet <input type="checkbox"/> am Snack <input type="checkbox"/> mid-day snack <input type="checkbox"/> bedtime Snack Prescribed snack consisting of: 6 saltine crackers or 3 graham crackers <input type="checkbox"/> Other:		
<input type="checkbox"/> Lacto Vegetarian Diet (Allows milk and milk products) <input type="checkbox"/> Kosher Diet Plan		Food Service Verification Physician or Chaplain Signature: <i>[Signature]</i> Date: 8-28-14

(4)

My Injury

- (23) High Blood Pressure kills and creates other medical complications
- (24) I am housed in a Special Medical Unit due to my High Blood Pressure AND MEDICAL COMPLICATIONS NOT PROPERLY TREATED

Imminent Danger

- (25) I am in imminent danger of death and other forms of serious Physical injury, heart attack, coronary disease etc.

Second Action

- (26) Beginning July 23rd 2013 I am being provided medication, gabapentin, senna, Zyrtec, plavix, omeprazole, doxazosin, finasteride, aspirin, flo-nase, clonidine, prednisone, for my neuropathy, urology and other medical conditions
- (27) I am unable to walk without substantial pain, have problems sleeping, problems urinating, have shakes, have tremors, have severe allergies, am falling
- (28) The medication that I am being given is ineffective to treat my serious medical needs and my condition is getting worse. Now I am also having problems remembering
- (29) For non-medical reasons I am being denied examination by specialists
- (30) My condition is so bad that I am being held in a unit that provides home health care

(5)

- (32) because of the policies by those in paragraph 2, defendants Martinez, Burciaga, Porter, Lyon, Bedoya, Robertson, Does, Ryan, Respicio-Morlarty have refused to have me receive effective medications and be seen by specialists though they have the authority to do so, they refuse due to non-medical reasons
- (33) Erwin, Dasset, and Frame, have refused to allow me to receive the medical texts so that I know what proper treatment should be.
- (33) Defendants have acted with and continue to act with deliberate indifference to my serious medical needs

My Injury

- (34) I am having shakes, tremors, great deal of unbearable pain, having problems walking, problems urinating, losing my memory and am now in a home health type facility.

Imminent Danger

- (35) The injury in paragraph 34 may cause serious permanent injury

Third Action

- (36) For my serious medical needs health care providers have with a consistency issued orders in the form of permanent special needs orders
- (37) I am 62 years old with severe neuropathy and have a bottom bunk order
- (38) For my acid reflux I have a bed wedge and a bed wedge order

(6)

(39) To soak my feet to relieve pain I cannot walk wearing boots or deck shoes due to neuropathy. Providers since 1993 have given me special needs orders for tennis shoes to relieve my pain. when I asked corizon to purchase tennis shoes for me cause of the money they canceled the order because my tennis shoes have hard plastic sticking out piercing my feet.

(40) I have other similar orders

(41) ADOC lost my mattress for neuropathy pain - when I asked them to replace it Pacheco, Bedoya, Lyon, Burciaga, Porter, threatened me and refused to replace that mattress. I am in great deal of pain

(42) As I have substantial pain in my testicles I have an order for cotton boxer briefs - when I asked that I be given more briefs, those in 41 refused to replace it I am in great deal of pain

(43) I get foot sores when I wear nylon socks when I asked for more socks those in 41 refused I now am wearing cotton socks with holes

(44) Defendants did this for non-medical reasons due to the money it takes to replace these

(45) I have pain that is Injury unbearable, foot sores etc.

(46) Imminent Danger

The pain is getting worse and my sores may get permanent
5th Action

(47) I am a British Citizen and defendants of Tennessee and Arizona. Prior to my arrest I was a resident of Los Angeles, California and never of Arizona or Tennessee. On my release I plan to go back to California

(7)

- ④ The amount in controversy, exclusive of interest and costs exceeds \$250,000
- ④ Defendants failed to exercise the necessary skills, learning, experience expected of prudent health care providers in same or similar circumstances in the local community
- ⑤ They profess to be specialists with the same degree and skill as those who based on their specialized board certification, learning and experience diagnosed and gave me the meds that managed my condition
- ⑤ As a direct and proximate cause of defendants actions in paragraphs 1 through 46 breach of contract and negligence I have been injured and continue to suffer unwanted pain and suffering,
- ⑤ Johnson, Flatt, Nolan, Walker, Myers, Witty, Dan, Bowers, and Corizon receive payment from the Affordable Care Act and tax as well as other Federal Benefits to provide health benefits care that comports to constitutional standards
- ⑤ To obtain these benefits they have represented through application Returns and ^{CORPORATE} ~~cooperate~~ documents that they are providing care that comports to constitutional standards
- ⑤ I paid corizon money to provide me health care for my serious medical needs in this complaint which I did not receive
- ⑤ Corizon and defendants in 52 made the representations in paragraph 56-57 which they knew were false and had no reasonable basis for believing they were true, they did so with the intent to induce the execution of the contracts to provide healthcare, which contracts became the vehicle to defraud.

- 56) Defendants in 52 retained the monies they received on the contracts without offering the mandatory
- 57) In every contract or agreement there is an implied promise of good faith and fair dealing. This means defendants are to provide the agreed upon service.
- 58) Defendants had a meeting of the minds when they put in place the Corizon policies, practices, customs and traditions referred to in this complaint. This scheme provides for denying/delaying medical care to inmates so as to save money for Corizon.
- 59) As a shield, Corizon uses other physicians, who are not familiar with inmates medical records, who are not board certified specialists, to deny medical care for serious physicians medical records, thereby relieving bonuses. When sued these physicians give cover to Corizon.
- 60) Each and every defendant's individual acts in this complaint and conspiracies were intended to, and did constitute violations of the 8th amendment.
- 61) Each and every defendant acted with deliberate indifference to serious medical needs inflicting upon me unwanted pain and suffering as I describe.
- 62) Injury I have increased shakes, tremors, cannot walk without pain, bad allergies, chills, chest pain, cannot urinate, my right heel area with cyst aches.

(9)

Sixth Action

- (63) Days in writing approved forme to use library computers for my Phd.
- (64) For no valid reason and upon the request of Erwin, as I have demanded I have receive care that is necessary for my serious medical needs Days directed staff not to allow me the use of these computers.
- (65) E mails to and from defendants named in this complaint, show that what defendants tell the court they have done and are doing is in direct contradictions to the contents of those E-mails
- (66) These E-mails show a deliberate agreement to deny treatment for serious medical needs for non-medical reasons.
- (67) These E-MAILS show a deliberat decision to conceal records that show defendants deciding to act with deliberate indifference
- (68) Equitable Relief arises in this case from the conduct of these defendants that are reflected in these e-mails, menus, thier written words, positive acts, opinions, declarations, grievance responses, settlements, adverse court decisions
- (69) The court decisions show Carizon has a policy of deliberate indifference also show ADOC has such a policy

Injury

I have shakes, tremors, am in a home health type facility

Declaratory Relief

10

- 70) The following evidence in the custody of Corizon and those in paragraph 2 show that those in paragraph 2 have established the administrative practice of denying, delaying, deferring treatment for serious medical needs for non medical reasons so as to make a profit, and this is why I was denied treatment *Karr v Bay*, 413 F-Supp 579,505 (N-D Ohio 1976)
- 71) Pursuant to 28 U.S.C. 2201 I request declaratory judgement that the practice in paragraph 1 to 63 is reflected in (A) Corizon's unwritten practices; (B) Corizon's Policies; (C) settlements entered into by Corizon (D) Bids submitted by Corizon including memos, e-mail- leading to these bids (E) Contracts not renewed and cancelled against Corizon (F) Audits of Corizon (G) minutes of meetings of the board of directors and executive committee of Corizon (H) Filings by Corizon with federal agencies (I) Responses by Corizon to request for discovery in litigation in federal and state courts (J) Exit interviews by Corizon employees, see *Coleman v American Broad* CDS 106 FRD 201, 207-09 (D.D.C. 1985)
- 72) Injury
I have increased shakes, tremors, high blood pressure, urination problems, problems walking, sleeping etc.
- 73) Imminent Danger
The increased shakes, tremors, high blood pressure, etc. expose me to imminent danger of physical injury.

Anant Kumar Tripathi
102081

P.O. Box 24401

Tucson, Az 85734

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IN CLERK'S OFFICE**

JAN 25 2016

**U.S. DISTRICT COURT
MID. DIST. TENN.**

United States District Court
MIDDLE DISTRICT TENNESSEE

Anant Kumar Tripathi

No.

vs.

Motion to proceed

Corizon Inc etc

due to imminent danger

As a direct consequence of defendants delaying/denying treatment Paragraphs (13-42, 26-34, 36-45, 47-61, 63-69, 70-72) due to policies formed in Tennessee Paragraph (3-11) directives from Tennessee, Plaintiff is in imminent danger of serious physical injury (para 25, 35, 46, 62, 66, 70, 73) Requesting to proceed in former Pauper's, due to imminent danger ¹¹ (para 14, 15, 17, 24, 28, 29, 30)

Respectfully Submitted
Anant Kumar Tripathi



11 As Policies are formed in Brentwood and orders as to deliberate indifference issued from Brentwood, venue is proper in this court

Inmate 011224
ADC # 1024
Arizona State Prison Complex PM
Unit in m
in m AZ 634

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IN CLERK'S OFFICE

JAN-25 2016

U.S. DISTRICT COURT
MID. DIST. TENN.



U.S. DISTRICT COURT
801 BROADWAY # 800
Nashville, TN 37203